OFFICIAL FILE ILLINOIS ILLINOIS COMPLETO COMPLAINT 2004 SEP 30 1 A Illinois Commerce Commission

For Commission Use Only:

Case: 04-0596

Springfield, Illinois 62701

ORIGINAL

Regarding a complaint by (Person making the complaint): <u>Karen J. Dimond</u>
Against (Utility name): NICOR Gas
As to (Reason for complaint)
2) Moving a meter without consent
in
TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:
My mailing address is 8242 N. Messill, Nikes IL 60714
The service address that I am complaining about is $(59me)$
My home telephone is $[897] 825 - 8242$
Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at $[312]814 \rightarrow 120$
(Full name of utility company) (respondent) is a public utility and is subject to the provisions of the Illinois Public Utilities Act.
In the space below, list the specific section of the law, Commission rule(s), or utility tariffs that you think is involved with your complaint.
83 II, Admin. (ode 500.240/b) 83 III. Admin. Code 500.170
83 Ill. Admin. (vae 280,80
83 Il. Admin. Códo 280. 100
Have you contacted the Consumer Services Division of the Illinois Commerce Commission about your complaint?
Has your complaint filed with that office been closed?

Please state your complaint briefly. Number each of the paragraphs. Please include time period and dollar amounts involved with your complaint.	Use an
extra sheet of paper if needed.	

(See a Hacked.)

Please clearly state what you want the Commission to do in this case:

(See a Hached.)

Sept. 17 2004 Complement's Signature Law Dimond

If an attorney will represent you, please give the attorney's name, address, and telephone number.

You need to file the original with the Commission. Also, provide one copy for each utility complained about (referred to as respondents).

VERIFICATION

A notary public must witness the completion of this part of the form.

I. <u>Jacon John on John</u>

Subscribed and sworn/affirmed to before me on (month, day, year) <u>Sept. 17, 2004</u>.

Notary Public, Illinois

OFFICIAL SEAL **HEIDI TRAUM** NOTARY PUBLIC, STATE OF ILLINOIS

MY COMMISSION EXPIRES 8-16-2005 NOTE: Failure to answer all of the questions on this form may result in this form being returned without processing. If you have questions, please call the counselor in the Consumer Services Division that handled your informal complaint.